

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Guild for Congress

ADDRESS (number and street)

PO Box 6621

Check if different  
than previously  
reported. (ACC)

Edmond

OK

73083

2. FEC IDENTIFICATION NUMBER ▼

C

C00546242

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

OK

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Guild

Signature of Treasurer

Thomas Guild

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 14

Write or Type Committee Name

Guild for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	3

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	4312.68	4312.68
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	4312.68	4312.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	3486.13	3486.13
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	3486.13	3486.13
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	2953.05	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1200.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 14

Write or Type Committee Name

**Guild for Congress**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
01 / 01 / 2013

To:

M M / D D / Y Y Y Y  
06 / 30 / 2013

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

1501.00

1501.00

(ii) Unitemized.....

2811.68

2811.68

(iii) TOTAL of contributions from individuals ▶

4312.68

4312.68

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

0.00

0.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

4312.68

4312.68

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

1200.00

1200.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

1200.00

1200.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

926.50

926.50

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

6439.18

6439.18

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 14

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3486.13	3486.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3486.13	3486.13

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6439.18
25. SUBTOTAL (add Line 23 and Line 24).....	6439.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3486.13
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2953.05

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Guild for Congress**

Full Name (Last, First, Middle Initial)

**Joel Epstein**

Mailing Address 521 W Lyon Farm Dr

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Consultant

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4242

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

**James Gragg**

Mailing Address 10609 Regent

City

Oklahoma City

State

OK

Zip Code

73162

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		01		2013

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

**Barbara Hall**

Mailing Address 9532 Sand Hill Ct

City

Highlands Ranch

State

CO

Zip Code

80126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
InformationOccupation  
Requested

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2013

Transaction ID : SA11AI.4231

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

575.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Guild for Congress**

Full Name (Last, First, Middle Initial)

**Gene Hunt**

Mailing Address 4536 Kiva Ct

City

Oklahoma City

State

OK

Zip Code

73135

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 25 / 2013

Transaction ID : SA11AI.4144

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**Gene Hunt**

Mailing Address 4536 Kiva Ct

City

Oklahoma City

State

OK

Zip Code

73135

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 07 / 2013

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

**Gene Hunt**

Mailing Address 4536 Kiva Ct

City

Oklahoma City

State

OK

Zip Code

73135

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

476.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 21 / 2013

Transaction ID : SA11AI.4210

Amount of Each Receipt this Period

26.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

476.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Guild for Congress**

Full Name (Last, First, Middle Initial)

**Nancy Kenderdine**

Mailing Address 2805 NW 166th St

City

Edmond

State

OK

Zip Code

73012

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2013

Transaction ID : SA11AI.4255

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**Nancy Kenderdine**

Mailing Address 2805 NW 166th St

City

Edmond

State

OK

Zip Code

73012

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2013

Transaction ID : SA11AI.4232

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**  
Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

1501.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 14

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Guild for Congress**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Thomas Guild</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 01 / 2013	
Mailing Address PO Box 6621		<b>Transaction ID : SA13A.4284</b>	
City Edmond	State OK	Zip Code 73083	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C H00K05155		Loan	
Name of Employer University of Central Oklahoma	Occupation Professor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Thomas Guild</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2013	
Mailing Address PO Box 6621		<b>Transaction ID : SA13A.4209</b>	
City Edmond	State OK	Zip Code 73083	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C H00K05155		Loan	
Name of Employer University of Central Oklahoma	Occupation Professor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00		
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period	
City	State	Zip Code	Loan
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1200.00	
<b>TOTAL</b> This Period (last page this line number only).....		1200.00	



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 14

☐ 11a ☐ 11b ☐ 11c ☐ 11d ☒ 15  
12 13a 13b 14

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NAME OF COMMITTEE (In Full)  
**Guild for Congress**

Full Name (Last, First, Middle Initial)

**Monarch Marketing Group, LLC**

Mailing Address 200 NW 63rd St

City

Oklahoma City

State

OK

Zip Code

73116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

926.50

Date of Receipt

M M / D D / Y Y Y Y  
04 / 02 / 2013

Transaction ID : SA15.4278

Amount of Each Receipt this Period

926.50

Refund of TV Ad fees

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

926.50

926.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Guild for Congress

Full Name (Last, First, Middle Initial)

**A. IPGI - IMAGENation Promotional Group, Inc.**

Mailing Address 2720 N May Ave

City	State	Zip Code
Oklahoma City	OK	73107

Purpose of Disbursement  
Magnetic Signs

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2013

Amount of Each Disbursement this Period

247.09
--------

Transaction ID : SB17.4119

**B. L.L. James Printing Co.**

Mailing Address 7156 Melrose Ln

City	State	Zip Code
Oklahoma City	OK	73127

Purpose of Disbursement  
Program Ad Expense

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		06		2013

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.4126

**c. Oklahoma Democratic Party**

Mailing Address 4100 N Lincoln Blvd

City	State	Zip Code
Oklahoma City	OK	73105

Purpose of Disbursement  
1/2 Table at Carl Albert Dinner Event

007

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2013

Amount of Each Disbursement this Period

400.00
--------

Transaction ID : SB17.4127

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

722.09

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Guild for Congress**

Full Name (Last, First, Middle Initial)

**A. Pam Paul**

Mailing Address 2632 Cashion Pl

City	State	Zip Code
Oklahoma City	OK	73112

Purpose of Disbursement  
Professional Consulting Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2013

Amount of Each Disbursement this Period

100.00
--------

**Transaction ID : SB17.4122****B. Pam Paul**

Mailing Address 2632 Cashion Pl

City	State	Zip Code
Oklahoma City	OK	73112

Purpose of Disbursement  
Professional Consulting Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2013

Amount of Each Disbursement this Period

100.00
--------

**Transaction ID : SB17.4125****C. Pam Paul**

Mailing Address 2632 Cashion Pl

City	State	Zip Code
Oklahoma City	OK	73112

Purpose of Disbursement  
Professional Consulting Service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2013

Amount of Each Disbursement this Period

100.00
--------

**Transaction ID : SB17.4132****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

300.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 14

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Guild for Congress

Full Name (Last, First, Middle Initial)

**A. The Printers of Oklahoma, Inc.**

Mailing Address 1601 N. Portland

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2013

City	State	Zip Code
Oklahoma City	OK	73107

Amount of Each Disbursement this Period

Purpose of Disbursement  
10,000 Door hangers Printing Expense

1095.13
---------

Candidate Name

003

Transaction ID : SB17.4114

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1095.13

2117.22

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 13 OF 14

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4284

Guild for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Thomas Guild

**[PERSONAL FUNDS]**

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

PO Box 6621

City

State

ZIP Code

Edmond

OK

73083

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
01 / 01 / 2013

Date Due

M M / D D / Y Y Y Y  
/ 4/1/2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200.00

**TOTALS** This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 14 OF 14

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4209

Guild for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Thomas Guild

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

PO Box 6621

City

State

ZIP Code

Edmond

OK

73083

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

0.00

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
06 / 11 / 2013M M / D D / Y Y Y Y  
/ 4/1/2015Y Y Y Y Y Y  
0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

**TOTALS** This Period (last page in this line only)..... ►

1200.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.